

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS**
Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/568,265
Filing Date	August 18, 2006
First Named Inventor	Schwarz, Stefan
Group Art Unit	3729
Examiner Name	Not yet assigned
Attorney Docket Number	20496-506

Please change the Correspondence Address for the above-identified application to:

The address associated with

Customer Number:

Type Customer Number here

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State	Zip	
Country				
Telephone		Email		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor.
- Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- Attorney or agent of record. Registration Number L0312
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or
Printed Name Pankaj N. Desai

Date	February 4, 2008	Telephone (617) 526-9747
------	------------------	--------------------------

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

*Total of _____ forms are submitted.